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| Fill In this Information to identify your case: | | | |
|-----------------------------------------------------------------------------------------|-------------------------------|---|--------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION | | | |
| Case number (# known) | Chapter you are filing under: | | |
| | Chapter 7 | | |
| | ☐ Chapter 11 | 1 | |
| | ☐ Chapter 12 | | |
| 9 | ☐ Chapter 13 | | Check if this an amende filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

| Pai | t 1: Identify Yourself | | |
|-----|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Nick First name | Nicole First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Baker East name and Suffix (Sr., Jr., II, III) | Baker Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years include your married or maiden names. | Nicholas Baker | Eleanor Nicole baker |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4290 | xxx-xx-3960 |
| | | | |

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| otor 1 Dtor 2 Baker, Nick & Bak | er, Nicole | Case number (if known) | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Any business names and Employer identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | About Debtor 1: I have not used any business name or EINs. Business name(s) EINs | About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs. Business name(s) | | | |
| Where you live | 610 Cottage Row | If Debtor 2 lives at a different address: | | | |
| | Sycamore, IL 60178-2109 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | DeKalb | STATE CONTRACTOR STATE CONTRACTOR AND A CONTRACTOR OF THE CONTRACT | | | |
| | County | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live | About Debtor 1: Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business es names Business name(s) EINS Where you live 610 Cottage Row Sycamore, IL 60178-2109 Number, Street, City, State & ZIP Code DeKalb County If your malting address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | | | |

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| Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole | | | Case number (it known) | | | | | |
|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--|
| Par | t 2: Tell the Court About 1 | our Bankı | ruptcy Ca | se | | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | ■ Chapt | ter 7 | | | | | |
| | | ☐ Chapter 11 | | | | | | |
| | | ☐ Chapt | er 12 | | | | | |
| | | ☐ Chapt | ter 13 | | | | | |
| 8. | How you will pay the fee | about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or not fix your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Installments. | | | | | heck, or money order. neck with a | |
| | | ☐ I re | quest that required to required to required size | nstauments (Official Form 1 It my fee be walved (You m o, waive your fee, and may d te and you are unable to pay | 03A). hay request this option to so only if your income the fee in installme | on only if you are filing for Chapter 7. By la ome is less than 150% of the official pover nts). If you choose this option, you must fil 3) and file it with your petition. | w, a judge may, but is | |
| 9. Have you filed for bankruptcy within the last 8 years? | | | | | | | | |
| | | | District | · | When | Case number | | |
| | | | District | • | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | | 1.52(31) | | | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by | | | | | | | |
| | a business partner, or by an affiliate? | | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | *************************************** | When | Case number, if known | | |
| | | | Debtor | | - 1300 W. M. | Relationship to you | | |
| | | | District | · · · · · · · · · · · · · · · · · · · | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | | |
| | 103.001.001 | ☐ Yes. | Has yo | ur landlord obtained an evic | ion judgment agains | st you and do you want to stay in your resid | lence? | |
| | | | | No. Go to line 12. | | 100 ± 30 | | |
| | | | | Yes. Fill out Initial Statement bankruptcy petition. | nt About an Eviction | Judgment Against You (Form 101A) and | file it with this | |
| | | | | | | | | |

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| | tor 1 tor 2 Baker, Nick & Bak | er, Nico | le | | Case number (if known) | | | |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Part | Report About Any Bus | sinesses \ | ou Own a | as a Sole Propriet | or | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Numb | er, Street, City, Sta | ate & ZIP Code | | | |
| | to this petition. | | Check | the appropriate bo | x to describe your business: | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | è | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | operation | s. If you inc | icate that you are a | court must know whether you are a small business debtor so that it can set appropriate is small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11 | | | |
| | For a definition of small | ■ No. | l am n | ot filing under Cha | pter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | l am fi Code. | ling under Chapter | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | l am fi | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Pari | Report if You Own or | Have Any | Hazardou | is Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | | What is t | he hazard? | | | | |
| | safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | | |
| | | | | | Number, Street, City, State & Zip Code | | | |

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| Deb | Baker, Nick & Baker, Nicole | | | | | | Case number (if known) |
|--------------------|-----------------------------------------------------------------------------------------------------------------|------|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pan | 5 Explain Your Efforts t | o Re | ceive a Briefii | ng About Credit Counseling | | | |
| | | Abo | out Debtor 1: | | | Abo | out Debtor 2 (Spouse Only in a Joint Case): |
| you brie cou | Tell the court whether you have received a briefing about credit counseling. The law requires that you | You | counseling filed this ba | one: briefing from an approved credit agency within the 180 days before I nkruptcy petition, and I received a f completion. | | | I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| | receive a briefing about credit counseling before you file for bankruptcy. You | | Attach a copy if any, that yo | y of the certificate and the payment plan, ou developed with the agency. | | | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| | must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. | | counseling filed this ba | briefing from an approved credit agency within the 180 days before I nkruptcy petition, but I do not have a f completion. | | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee | | Within 14 day you MUST fil plan, if any. | ys after you file this bankruptcy petition, le a copy of the certificate and payment | | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| yo ca | you paid, and your creditors can begin collection activities again. | | services fro unable to ob days after I | I asked for credit counseling m an approved agency, but was otain those services during the 7 made my request, and exigent tes merit a 30-day temporary walver rement. | | | from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| | | | requirement, efforts you m unable to obt what exigent | 30-day temporary waiver of the attach a separate sheet explaining what ade to obtain the briefing, why you were ain it before you filed for bankruptcy, and circumstances required you to file this | | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| | | | case. Your case many dissalisfied was briefing beform if the court is still receive a You must file along with a case. | ay be dismissed if the court is with your reasons for not receiving a re you filed for bankruptcy. satisfied with your reasons, you must briefing within 30 days after you file. a certificate from the approved agency, copy of the payment plan you developed, do not do so, your case may be | | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| | | | for cause and | n of the 30-day deadline is granted only d is limited to a maximum of 15 days. ulred to receive a briefing about selling because of: | 1 8 3 | | I am not required to receive a briefing about credit counseling because of: |
| | | | that m | acity. a mental illness or a mental deficiency akes me incapable of realizing or making al decisions about finances. | | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | | to part or thro | ility. ysical disability causes me to be unable icipate in a briefing in person, by phone, ugh the internet, even after I reasonably o do so. | | | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | | l am c militar | e duty. urrently on active military duty in a y combat zone. | | | Active duty. I am currently on active military duty in a military combat zone. |
| | | | about credit | you are not required to receive a briefing counseling, you must file a motion for counseling with the count | ee 1 | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit |

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| | Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole | | | | Case number (if known) | | | |
|----------------------------------------------------|-----------------------------------------------|----------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------|------------------------------------------------------------------------------------------------|-----------------|
| Pari | 6: | Answer These Question | ons for Re | porting Purposes | | | | |
| 16. | | t kind of debts do have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. | | | | |
| | | | | Yes. Go to line 17 | | | | |
| | | | 16b. | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | |
| | | | | | | | | |
| | | | | ☐ Yes. Go to line 17 | · | | | |
| | | | 16c. | State the type of debts | s you owe that are not | consumer debts or busin | ness debts | |
| 17. | | you filing under pter 7? | □ No. | I am not filing under (| Chapter 7. Go to line | 18. | | |
| | any | ou estimate that after exempt property is uded and | Yes. | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | |
| | adm are p | inistrative expenses oald that funds will be | | ■ No | | | | |
| | avail | lable for distribution nsecured creditors? | | ☐ Yes | | | | |
| 18. | | How many Creditors do you estimate that you owe? | 1 -49 | | □ 1,0 | 00-5,000 | □ 25,001-50,000 | |
| | | | 50-99 | | | 01-10,000 | □ 50,001-100,000 | |
| | | | ☐ 100-19 ☐ 200-99 | | | 001-25,000 | ☐ More than100,000 | |
| 19. | | much do you nate your assets to | ■ \$0 - \$ | 50,000 | | 000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | | orth? | □ \$50,001 - \$100,000 | | | 0,000,001 - \$50 million 0,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion | |
| | | | □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | | 00,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | ı |
| 20. | | much do you nate your liabilities to | = \$0 - \$5 | | | 000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | be? | , | | 01 - \$100,000 | | 0,000,001 - \$50 million 0,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | |
| | | | □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | | 00,000,001 - \$500 million | | |
| Par | 7: | Sign Below | | | | | V 404 12 40 40 40 40 40 40 40 40 40 40 40 40 40 | |
| For | you | | I have exa | mined this petition, and | d I declare under pen | alty of perjury that the info | rmation provided is true and correct. | |
| | | | If I have of States Co | thosen to file under Ch | napter 7, I am aware elief available under ea | hat I may proceed, if elig ich chapter, and I choose | gible, under Chapter 7, 11,12, or 13 of title 1 to proceed under Chapter 7. | 1, United |
| If no attorney repres have obtained and re | | | ney represents me and ined and read the notic | I I did not pay or agree ce required by 11 U.S. | to pay someone who is r C. § 342(b). | not an attorney to help me fill out this docume | ent, I | |
| I request relief in accordance with the chapter of | | | | | ith the chapter of title | 11, United States Code, | specified in this petition. | |
| | | | I understa | nd making a false state result in fines up to \$2 | ement, concealing pro | perty, or obtaining money ent for up to 20 years, or t | y or property by fraud in connection with a bar both. 18 U.S.C. §§ 152, 1341, 1519, and 357 | nkruptcy 71. |
| | | | Nick Ba Signature | ker of Debtor 1 | | Nicole Bake Signature of D | | |
| | | | Executed | on <u>March 7, 201</u> MM/DD/YYYY | | Executed on | March 7, 2016 MM/DD/YYYY | |

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| Debtor 1 Debtor 2 Baker, Nick & Ba | ker, Nicole | Cas | Case number (if known) | | | | |
|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| For your attorney, if you are represented by one if you are not represented by an attorney, you do not need to file this page. | Chapter 7, 11, 12, or 13 of title 11, United States person is eligible. I also certify that I have delive | s Code, and have explained ered to the debtor(s) the noti | ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in ry that the information in the schedules filed with the | | | | |
| ±200 ±200 ±200 ±200 ±200 ±200 ±200 ±200 | Signature of Attorney for Debtor | Date | March 7, 2016 | | | | |
| | Brian Wright Printed name Brian Wright & Associates, P.C. Firm name | | | | | | |
| | 437 West State Street Suite 101 Sycamore, IL 60178 Number, Street, City, State & ZIP Code | | | | | | |
| | Contact phone (815) 895-2074 | Email address | bw@wrightandassociateslaw.com | | | | |
| | 6304330 | | | | | | |

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| | | Documer | nt Page 8 of 50 | | |
|---------------------------------|-------------------------|---------------------|---------------------------|-----|--------------------------------------|
| Fill in this inform | nation to identify your | case: | | | |
| Debtor 1 | Nick Baker First Name | Middle Name | Last Name | } | |
| Debtor 2 (Spouse if, filing) | Nicole Baker First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT O | F ILLINOIS, WESTERN DIVIS | ION | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | _ | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 13,044.19 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 13,044.19 |
| Par | rt 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 11,930.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F | \$ | 32,173.51 |
| | Your total liabilities | \$ | 44,103.51 |
| Pai | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$ | 6,843.06 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,949.00 |
| Pai | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | ner schedul | les. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersonal, fan | nily, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo | x and subn | nit this form to the |

court with your other schedules.

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Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|--------------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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|--------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------|
| Fill in this | information to identify your | | | |
| Debtor 1 | Nick Baker | | | |
| 20010. | First Name | Middle Name Last Name | | |
| Debtor 2 | Nicole Baker | | | |
| (Spouse, if filing | ng) First Name | Middle Name Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISI | ON | |
| Case numb | ber | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| <u>Official</u> | I Form 106A/B | | | |
| Sche | dule A/B: Prop | oertv | | 12/15 |
| | • | pe items. List an asset only once. If an asset fits in more than or | ne category, list the asset in the | |
| think it fits b | est. Be as complete and accur | ate as possible. If two married people are filing together, both and a separate sheet to this form. On the top of any additional page | re equally responsible for sup | plying correct |
| Answer ever | • | i a separate sneet to this form. On the top of any additional page | ss, write your name and case | number (ir known). |
| Part 1: De | scribe Fach Residence Ruildin | g, Land, or Other Real Estate You Own or Have an Interest In | | |
| rait i. Do | Scribe Lacri Residence, Buildin | g, Edita, or Other Real Estate 100 0wil of flave all interest in | | |
| 1. Do you o | wn or have any legal or equitab | le interest in any residence, building, land, or similar property? | | |
| ■ No. Go | to Part 2. | | | |
| _ | Where is the property? | | | |
| | There is the property. | | | |
| Part 2: De | scribe Your Vehicles | | | |
| Do vou ow | n loaco or have logal or og | uitable interest in any vehicles, whether they are register | ad ar nat2 Include any vehic | eles you own that |
| | | e, also report it on Schedule G: Executory Contracts and Une | | ies you own that |
| 3 Cars va | ıns, trucks, tractors, sport u | tility vehicles, motorcycles | | |
| | mo, muono, muonoro, oport u | imity vernoics, motorcycles | | |
| □ No | | | | |
| Yes | | | | |
| | 0110 | | Do not deduct secured cla | sime or exemptions. But |
| 3.1 Mak | V I - VI | Who has an interest in the property? Check one | the amount of any secure | d claims on Schedule D: |
| Mod | | Debtor 1 only | Creditors Who Have Clair | ns Secured by Property. |
| Year | | Debtor 2 only | Current value of the | Current value of the |
| | roximate mileage:er information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | C Yukon XL | At least one of the debtors and another | | |
| Givi | C TUROTI AL | ☐ Check if this is community property | \$3,948.00 | \$784.00 |
| | | (see instructions) | | |
| 00 14 1 | e: Honda | W | Do not deduct secured cla | aims or exemptions. Put |
| 3.2 Mak | Assessed | Who has an interest in the property? Check one | the amount of any secure | d claims on Schedule D: |
| Mod Year | | Debtor 1 only | Creditors Who Have Clair | ns Secured by Property. |
| | | Debtor 2 only | Current value of the | Current value of the |
| | roximate mileage:er information: | Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property? | portion you own? |
| | 4 Honda Accord | At least one of the deptots and another | | |
| 133 | - Holida Accold | Check if this is community property (see instructions) | \$759.00 | \$759.00 |

Official Form 106A/B Schedule A/B: Property page 1 Case 16-80694 Doc 1 Filed 03/22/16 Entered 03/22/16 16:01:41 Desc Main Document Page 11 of 50

| Make: | Dodge | Who has an interest in the property? Check one | | claims or exemptions. Put |
|----------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------|
| Model: | Ram Pickup 1500 | Debtor 1 only | | red claims on Schedule D: aims Secured by Property. |
| Year: | 2002 | Debtor 2 only | Oreanors who have on | anno occurca by 1 roporty. |
| | nate mileage: | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| • • • | ormation: | Debtor Fand Debtor 2 only At least one of the debtors and another | entire property: | portion you own: |
| | odge Ram SLT | At least one of the debtors and another | | |
| Not Ru | | Check if this is community property (see instructions) | \$4,503.00 | \$2,558.3 |
| Make: | | Who has an interest in the property? Check one | | claims or exemptions. Put red claims on <i>Schedule D</i> : |
| Model: | | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property. |
| Year: | | Debtor 2 only | Current value of the | Current value of the |
| Approxir | nate mileage: | ■ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | ormation: | At least one of the debtors and another | | |
| 2006 F Main s winter | ord 250 Super Duty XL ource of income in | ☐ Check if this is community property (see instructions) | \$5,161.00 | \$4,556.00 |
| Make: | Dodge | Who has an interest in the property? Check one | | claims or exemptions. Put |
| Model: | Ram Pickup 2500 | Debtor 1 only | | red claims on Schedule D: aims Secured by Property. |
| Year: | 2000 | Debtor 2 only | O | O |
| Approxir | nate mileage: | ■ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | ormation: | ☐ At least one of the debtors and another | | |
| 2000 🛚 | odge Ram 2500 SLT | ☐ Check if this is community property (see instructions) | \$3,271.00 | \$3,271.00 |
| Make: | | Who has an interest in the property? Check one | | claims or exemptions. Put |
| Model: | | Debtor 1 only | | red claims on Schedule D: aims Secured by Property. |
| Year: | 1995 | Debtor 2 only | 0 | • |
| Approxir | nate mileage: | ■ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| Other in | ormation: | ☐ At least one of the debtors and another | | |
| Bobca | t 853H |] | | |
| | | Check if this is community property (see instructions) | \$8,000.00 | \$0.00 |
| | | and other recreational vehicles, other vehicles, and atercraft, fishing vessels, snowmobiles, motorcycle acce | essories | |
| Add the da | Har value of the parties you s | | | #44.000.05 |
| ou have a | ttached for Part 2. Write that i | wn for all of your entries from Part 2, including any number here | => | \$11,928.35 |
| ou have a | ttached for Part 2. Write that it be Your Personal and Household | number here | => | \$11,928.35 Current value of the portion you own? Do not deduct secured claims or exemptions. |

| De | ebtor 1 | Case 16-8 | | Doc 1 | Filed 03/22/16 Document | Entered 03/ Page 12 of 50 | 22/16 16:01:41 0 | Desc Main |
|-----|----------------------------------|---------------------------------------------------------------------------------|--------------|----------------|----------------------------------------------|------------------------------|---------------------------|-----------------------------------------------------------------------------------|
| | ebtor 2 | Baker, Nick | & Baker, | Nicole | | | Case number (if know | n) |
| | □No | es: Televisions an | | | ereo, and digital equipm a players, games | ent; computers, printer | rs, scanners; music co | llections; electronic devices |
| | — 163. | Describe | TV, lapt | top, Wii | | | | \$170.00 |
| | Example No | bles of value es: Antiques and f collections, m Describe | | | s, or other artwork; book | ss, pictures, or other ar | t objects; stamp, coin, | or baseball card collections; other |
| | Example No | ent for sports an es: Sports, photog instruments | | | ner hobby equipment; bi | cycles, pool tables, gol | f clubs, skis; canoes a | nd kayaks; carpentry tools; musical |
| | □ No · | | , shotguns | , ammunition | , and related equipmen | t | | |
| | | | Shot gu | ın | | | | \$125.00 |
| | ■ No □ Yes. Jewelry Examp □ No | Describe | elry, costui | me jewelry, er | designer wear, shoes, a | | Iry, watches, gems, go | |
| | | | weddin | g rings | | | | \$400.00 |
| 14. | Examp ■ No □ Yes. Any oth ■ No | rm animals oles: Dogs, cats, b Describe her personal and Give specific info | l househo | ld items you | did not already list, ir | ncluding any health a | ids you did not list | |
| 15 | | | | | om Part 3, including a | | ou have attached fo | \$1,040.00 |
| | | scribe Your Finance | | deals to the | -4 to | : | | Comment and a set |
| Do | you ow | vn or have any le | egal or equ | iitable intere | st in any of the follow | ing? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | oles: Money you ha | | - | r home, in a safe deposi | t box, and on hand whe | en you file your petition | |

Case 16-80694 Doc 1 Filed 03/22/16 Entered 03/22/16 16:01:41 Desc Main Document Page 13 of 50 Debtor 1 Baker, Nick & Baker, Nicole Case number (if known) Debtor 2 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking Account National Bank and Trust \$10.00 17.2. **Checking Account National Bank and Trust** \$15.00 **National Bank and Trust** \$50.00 17.3. **Savings Account National Bank and Trust** \$0.84 17.4 **Savings Account** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No □ Yes. Give specific information about them...

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

☐ Yes.....

| De | ebtor 1 | Case 16-80 | | | Filed 03/22/16 Document | Entered 03/22/16 16:01:41 Page 14 of 50 | Desc Main |
|-----|------------------------|--------------------------------------------------------------------------------|----------------------|------------------------------|--------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------------|
| | ebtor 2 | Baker, Nick & | | | | Case number (if known) | |
| 26. | Exam _l ■ No | oles: Internet domaii | n names | , websites, pro | ts, and other intellectua oceeds from royalties and | Il property I licensing agreements | |
| | ⊔ Yes. | Give specific infor | mation a | about them | | | |
| 27. | Exam _l ■ No | es, franchises, and ples: Building permit Give specific infor | s, exclus | sive licenses, | ngibles cooperative association h | oldings, liquor licenses, professional licenses | |
| M | oney or | property owed to | you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | funds owed to you | I | | | | |
| | ■ No □ Yes. | Give specific inform | nation ab | out them, incl | luding whether you alread | y filed the returns and the tax years | |
| 29. | Examp ■ No | support oles: Past due or lui | | | usal support, child suppo | rt, maintenance, divorce settlement, property | settlement |
| 30. | Exam _l ■ No | amounts someone oles: Unpaid wages, unpaid loans Give specific inforr | disabilit you mad | y insurance p | | ts, sick pay, vacation pay, workers' compensa | tion, Social Security benefits; |
| 31. | | sts in insurance po oles: Health, disabili | | insurance; he | ealth savings account (HS | SA); credit, homeowner's, or renter's insurance | |
| | | Name the insurance | | ny of each po npany name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a died. | | f a living | | someone who has diec proceeds from a life insur | I rance policy, or are currently entitled to receive | property because someone has |
| 33. | Exam _l ■ No | | ploymen | nt disputes, in | /ou have filed a lawsuit surance claims, or rights | or made a demand for payment to sue | |
| 34. | ■ No | contingent and un | | ed claims of | every nature, including | counterclaims of the debtor and rights to | set off claims |
| 35 | | nancial assets you | | already list | | | |
| JJ. | ■ No | • | | aneauy iist | | | |
| | ☐ Yes. | Give specific inform | nation | | | | |
| 36 | | | | | | y entries for pages you have attached for | \$75.84 |
| | | | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

| Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole Case number (if known) 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| | |
| | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| ■ No. Go to Part 7. | |
| ☐ Yes. Go to line 47. | |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No | |
| ☐ Yes. Give specific information | |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | |
| 55. Part 1: Total real estate, line 2 | \$0.00 |
| 56. Part 2: Total vehicles, line 5 \$11,928.35 | |
| 57. Part 3: Total personal and household items, line 15 \$1,040.00 | |
| 58. Part 4: Total financial assets, line 36 \$75.84 | |
| 59. Part 5: Total business-related property, line 45 \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 + \$0.00 | |
| 62. Total personal property. Add lines 56 through 61 \$13,044.19 Copy personal property total | \$13,044.19 |

\$13,044.19

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

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| Fill in this inform | nation to identify your | case: | | |
|---------------------|--------------------------|-------------------|------------------------|----------|
| Debtor 1 | Nick Baker | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | E: AN | ACT III AT | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | inkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN D | DIVISION |
| | | | | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the | Property | You | Claim a | s Exempt |
|---------|----------|-----|----------|-----|---------|----------|
|---------|----------|-----|----------|-----|---------|----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|-------------------------------------------------------------------------------------|-----------------------------------------|-----|-----------------------------------------------------------------|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Debtor 1 Exemptions | | | | |
| GMC | \$784.00 | | \$2,500.00 | 735 ILCS 5/12-1001(b) |
| Yukon XL | | | | |
| 2003 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Honda Accord | \$759.00 | | \$759.00 | 735 ILCS 5/12-1001(c) |
| 1994 | | | 4000/ of fair resolutionly and to | |
| Line from Schedule A/B. 3.2 | | _ | 100% of fair market value, up to any applicable statutory limit | |
| Dodge Ram Pickup 1500 | \$2,558.35 | | \$2,000.00 | 735 ILCS 5/12-1001(b) |
| 2002 | | | 100% of fair market value, up to | |
| Line from Schedule A/B: 3.3 | | _ | any applicable statutory limit | |
| 2006 Ford 250 Super Duty XL Main source of income in winter | \$4,556.00 | | \$4,000.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B 3.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2006 Ford 250 Super Duty XL Main source of income in winter | \$4,556.00 | | \$384.16 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B. 3.4 | | | 100% of fair market value, up to any applicable statutory limit | |

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| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exem portion you own | | ount of the exemption you claim | Specific laws that allow exemption |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------|-----------------------------------------------------------------|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Dodge Ram Pickup 2500 | \$3,271.00 | | \$41.00 | 735 ILCS 5/12-1001(c) |
| | 2000 Line from Schedule A/B: 3.5 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Dodge Ram Pickup 2500 | \$3,271.00 | | \$2,000.00 | 735 ILCS 5/12-1001(b) |
| | 2000 Line from Schedule A/B: 3.5 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Couch, beds, dressers Line from Schedule A/B. 6.1 | \$345.00 | | \$345.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | TV, laptop, Wii Line from Schedule A/B 7.1 | \$170.00 | | \$170.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Shot gun Line from Schedule A/B 10.1 | \$125.00 | | \$125.00 | 735 ILCS 5/12-1001(b) |
| | Zine nem estredate / v Zi 1611 | | | 100% of fair market value, up to any applicable statutory limit | |
| | wedding rings Line from Schedule A/B 12.1 | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| | Zine nem estredae / v Zi 1211 | | | 100% of fair market value, up to any applicable statutory limit | |
| | National Bank and Trust Line from Schedule A/B 17.1 | \$10.00 | | \$10.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli ochledate AVIZ 1711 | | | 100% of fair market value, up to any applicable statutory limit | |
| | National Bank and Trust Line from Schedule A/B: 17.2 | \$15.00 | | \$15.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli Genedate AVE. 11.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | National Bank and Trust Line from Schedule A/B. 17.3 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | Line non schedule ALL 11.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | National Bank and Trust Line from Schedule A/B: 17.4 | \$0.84 | | \$0.84 | 735 ILCS 5/12-1001(b) |
| | Line non schedule AVE. 17.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 ■ No □ Yes. Did you acquire the property covered No | years after that for case | s filed | , | |
| | ☐ Yes | | | | |

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| | | | | | | _ | |
|-----------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------|
| Fil | l in this informa | ation to identify your c | ase: | | | | |
| De | btor 1 | | | | |] | |
| _ | la taran O | First Name | Middle Name | La | ast Name |] | |
| | btor 2 ouse if, filing) | Nicole Baker First Name | Middle Name | La | ast Name | | |
| Un | ited States Ban | kruptcy Court for the: | NORTHERN DISTRICT OF | FILLING | DIS, WESTERN DIVISION | | |
| Ca | se number | | | | | | |
| | nown) | | | | | | Check if this is an amended filing |
| Oí | fficial For | m 106C | | | | | |
| | | | perty You Cla | aim | as Exempt | | 12/15 |
| propout | perty you listed o | n Schedule A/B: Proper | ty (Official Form 106A/B) as y | our sou | both are equally responsible for sup rce, list the property that you claim as y. On the top of any additional pages | exempt. If | more space is needed, fill |
| spe app fun- to a app | cific dollar and dicable statutor ds—may be un particular doll dicable statutor | ount as exempt. Altern ry limit. Some exempti limited in dollar amour ar amount and the valury ary amount. | atively, you may claim the fons—such as those for heant. However, if you claim anue of the property is determ | ull fair Ith aids exemp | nt of the exemption you claim. Or market value of the property bein , rights to receive certain benefits tion of 100% of fair market value to exceed that amount, your exemp | g exempte s, and tax-e under a lav | d up to the amount of any exempt retirement vthat limits the exemption |
| Pa | rt 1: Identify | the Property You Clai | m as Exempt | | | | |
| 1. | Which set of e | exemptions are you cla | iming? Check one only, ever | n if your | spouse is filing with you. | | |
| | ■ You are clai | ming state and federal no | onbankruptcy exemptions. 11 | U.S.C. | § 522(b)(3) | | |
| | ☐ You are clai | ming federal exemptions | . 11 U.S.C. § 522(b)(2) | | | | |
| 2. | For any prope | erty you list on Schedu | lle A/B that you claim as exe | empt, fi | Il in the information below. | | |
| | | n of the property and line nat lists this property | on Current value of the portion you own | Amo | unt of the exemption you claim | Specific la | ws that allow exemption |
| | | | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | | |
| De | ebtor 2 Exem | | | | | | |
| | Brief description Line from Sche | | | | | | |
| | 2 | radio 1 / D. | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | (Subject to adju | ustment on 4/01/16 and of the property | | es filed | on or after the date of adjustment.) idays before you filed this case? | | |
| | | | | | | | |

Case 16-80694 Doc 1 Filed 03/22/16 Entered 03/22/16 16:01:41 Desc Main Document Page 19 of 50 Fill in this information to identify your case: Debtor 1 **Nick Baker** Middle Name Last Name Debtor 2 Nicole Baker Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column C Column A Column B 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this portion value of collateral. claim If any 2.1 Ntlbk Sycmre Describe the property that secures the claim: \$6,047.00 \$8,000.00 \$0.00 Creditor's Name 1995 **Bobcat 853H** As of the date you file, the claim is: Check all that 230 W State St apply. Sycamore, IL 60178-1419 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured ■ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number **Ntlbk Sycmre** Describe the property that secures the claim: \$3,164.00 \$3,948.00 \$0.00 Creditor's Name 2003 GMC Yukon XL **GMC Yukon XL** As of the date you file, the claim is: Check all that 230 W State St apply. Sycamore, IL 60178-1419 Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Last 4 digits of account number

Date debt was incurred

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| Debtor 1 Nick Baker | | ase number (f know) | | |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------|------------|--------|
| First Name Middle N | lame Last Name | | | |
| Debtor 2 Nicole Baker First Name Middle N | Name Last Name | | | |
| r not runne middle is | Lust Name | | | |
| 2.3 Ntlbk Sycmre | Describe the property that secures the claim: | \$2,114.00 | \$4,503.00 | \$0.00 |
| Creditor's Name | 2002 Dodge Ram Pickup 1500 2002 Dodge Ram SLT Not Running | | | |
| 230 W State St Sycamore, IL 60178-1419 Number, Street, City, State & Zip Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as mortgage or secur car loan) | ed | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | ☐ Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.4 Ntlbk Sycmre | Describe the property that secures the claim: | \$605.00 | \$5,161.00 | \$0.00 |
| Creditor's Name | 2006 Ford 250 Super Duty XL Main source of income in winter | | | |
| 230 W State St Sycamore, IL 60178-1419 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only ■ Debtor 2 only | ☐ An agreement you made (such as mortgage or secur car loan) | red | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | - | |
| • | lumn A on this page. Write that number here: | \$11,930.00 | 1 | |
| If this is the last page of your form, add the Write that number here: | ne dollar value totals from all pages. | \$11,930.00 | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| 0. | 200 10 0000+ 1 | Document Page 21 of 50 | 330 Main |
|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Fill in this infor | mation to identify your o | | |
| Debtor 1 | Nick Baker | | |
| Dobto. 1 | First Name | Middle Name Last Name | |
| Debtor 2 | Nicole Baker | | |
| (Spouse if, filing) | First Name | Middle Name Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION | |
| Case number (if known) | | | Check if this is an amended filing |
| Official Form | | ho Have Unsecured Claims | 12/15 |
| any executory con Schedule G: Execu D: Creditors Who I the Continuation F case number (if kn | tracts or unexpired leases utory Contracts and Unexpi Have Claims Secured by Pr Page to this page. If you have lown). | e Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims and Part 2 for creditors with NONPRIORITY claims to could result in a claim. Also list executory contracts on Schedule A/B: Property (Offired Leases (Official Form 106G). Do not include any creditors with partially secured claim operty. If more space is needed, copy the Part you need, fill it out, number the entries in the real on information to report in a Part, do not file that Part. On the top of any additional page. | cial Form 106A/B) and on is that are listed in Schedule he boxes on the left. Attach |
| | All of Your PRIORITY Un | | |
| | ors have priority unsecure | d claims against you? | |
| No. Go to I | Part 2. | | |
| Yes. | | | |
| Part 2: List A | All of Your NONPRIORIT | Y Unsecured Claims | |
| 3. Do any credit | ors have nonpriority unsec | ured claims against you? | |
| ☐ No. You ha | ave nothing to report in this pa | art. Submit this form to the court with your other schedules. | |
| Yes. | | | |
| unsecured cla | im, list the creditor separately | aims in the alphabetical order of the creditor who holds each claim. If a creditor has more to for each claim. For each claim listed, identify what type of claim it is. Do not list claims already is the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the | ncluded in Part 1. If more |
| | | | Total claim |
| 4.1 Amex | | Last 4 digits of account number | \$2,968.00 |
| Nonpriori | ty Creditor's Name | | |
| | pondence | When was the debt incurred? | <u> </u> |
| | x 981540 o, TX 79998-1540 | | |
| | Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | urred the debt? Check one. | | |
| ■ Debto | r 1 only | ☐ Contingent | |
| ☐ Debto | r 2 only | ☐ Unliquidated | |
| _ | r 1 and Debtor 2 only | ☐ Disputed | |
| _ | st one of the debtors and and | | |
| | k if this claim is for a comr | | |
| debt | im subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t |
| ■ No | | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | | Other. Specify | |
| | | — Outor, Opeony | |

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| Baker, Nick & Baker, Nicole | Case number (if know) | |
|-----------------------------------------------|---------------------------------------------------------------------------------|------------|
| Bby/cbna | Last 4 digits of account number | \$2,562.00 |
| Nonpriority Creditor's Name | <u> </u> | Ψ2,002.00 |
| | When was the debt incurred? | |
| PO Box 6497 Sioux Falls, SD 57117-6497 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Capital One | Last 4 digits of account number | \$2,826.00 |
| Nonpriority Creditor's Name | | * , |
| Attn: Bankruptcy | When was the debt incurred? | |
| PO Box 30285 Salt Lake City, UT 84130-0285 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | Other. Specify | |
| Capital One | Last 4 digits of account number | \$911.00 |
| Nonpriority Creditor's Name | When we the debt in some 40 | |
| Attn: Bankruptcy PO Box 30285 | When was the debt incurred? | |
| Salt Lake City, UT 84130-0285 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| | · · · · · · · · · · · · · · · · · · · | |

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| Baker, Nick & Baker, Nicole | Case number (f know) | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|------------|
| Comenity Bank/Gndrmtmc Nonpriority Creditor's Name | Last 4 digits of account number | \$7,040.00 |
| Nonpholity Creditors Name | When was the debt incurred? | |
| PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Dependon Collectoin Services Nonpriority Creditor's Name | Last 4 digits of account number | \$1,387.51 |
| . , . , | When was the debt incurred? | |
| PO Box 4833 | | |
| Oak Brook, IL 60522-4833 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the dain is. One of an that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Discover Financial | Last 4 digits of account number | \$7,428.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3025 | When was the debt incurred? | |
| New Albany, OH 43054-3025 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | _ | |
| Yes | Other. Specify | |

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| Debto | | Case number (f know) | |
|-------|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|----------|
| 4.8 | MED1 02 Kishwaukee Hospital Nonpriority Creditor's Name | Last 4 digits of account number | \$151.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 1 Kish Hospital Dr DeKalb, IL 60115-9602 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | no of the date you me, are claim to. Oncor an arecapply | |
| | Debtor 1 only | ☐ Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.9 | MED1 02 Kishwaukee Hospital | Last 4 digits of account number | \$138.00 |
| | Nonpriority Creditor's Name | | |
| | 1 Kish Hospital Dr DeKalb, IL 60115-9602 | When was the debt incurred? | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.10 | MED1 02 Kishwaukee Hospital | Last 4 digits of account number | \$69.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 1 Kish Hospital Dr DeKalb, IL 60115-9602 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |

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| Debto Debto | | Case number (f know) | |
|----------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------|
| 4.11 | MED1 02 Kishwaukee Hospital Nonpriority Creditor's Name | Last 4 digits of account number | \$53.00 |
| | Nonpholity Creditor's Name | When was the debt incurred? | |
| | 1 Kish Hospital Dr DeKalb, IL 60115-9602 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.12 | MED1 02 Valley West Hospital | Last 4 digits of account number | \$302.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 11 E Pleasant Ave | Then was the dest mounted: | |
| | Sandwich, IL 60548-1100 | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| | ORAL MAXILLOFACIAL | | |
| 4.13 | SURGEONS | Last 4 digits of account number | \$124.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 1675 Bethany Rd # A Sycamore, IL 60178-3160 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other Specify | |
| | 100 | - Oner Specify | |

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| Debto | Baker, Nick & Baker, Nicole | Case number (f know) | |
|-------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------|
| 4.14 | Rockford Health Physicians Nonpriority Creditor's Name | Last 4 digits of account number | \$199.00 |
| | Nonpholity Cleditor's Name | When was the debt incurred? | |
| | 2300 N Rockton Ave Rockford, IL 61103-3619 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | - | |
| | □ Yes | Other. Specify | |
| 4.15 | Syncb/Blains Farm&Flee Nonpriority Creditor's Name | Last 4 digits of account number | \$5,250.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 950 Forrer Blvd Kettering, OH 45420-1469 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 1 | | | |
| 4.16 | Target | Last 4 digits of account number | \$765.00 |
| | Nonpriority Creditor's Name C/O Financial & Retail Services Mailstop | When was the debt incurred? | |
| | PO Box 9475 Minneapolis, MN 55440-9475 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Other. Specify | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole

Case number (if know)

| have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out of | at you listed in Parts 1 or 2, list the adors submit this page. | ditional creditors here. If you do not have additional persons to be |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Name and Address Aishling Obstetrics and Gyn. | On which entry in Part 1 or Part 2 did you Line 4.6 of (<i>Check one</i>): | ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims |
| 831 Sandhurst Dr Sandwich, IL 60548-1390 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Candwich, 12 00340-1330 | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | ou list the original creditor? |
| Amex | Line 4.1 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| PO Box 297871 Fort Lauderdale, FL 33329-7871 | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? |
| Capital One Bank USA N | Line 4.3 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| 15000 Capital One Dr Richmond, VA 23238-1119 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| , | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did y | |
| Capital One Bank USA N | Line 4.4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| 15000 Capital One Dr Richmond, VA 23238-1119 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? |
| Comenity Bank/Gndrmtmc | Line 4.5 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| PO Box 182789 Columbus, OH 43218-2789 | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | ou list the original creditor? |
| Creditors Protection S | Line <u>4.14</u> of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims |
| 308 W State St Ste 485 Rockford, IL 61101-1196 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| , , , , , , , , , , , , , , , , , , , | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | |
| Discover Fin Svcs LLC PO Box 15316 | Line 4.7 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Wilmington, DE 19850-5316 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | _ |
| Horizon Fin 8585 Broadway # 88 | Line 4.12 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims |
| Merrillville, IN 46410-7064 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | |
| Horizon Fin 8585 Broadway # 88 | Line 4.8 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Merrillville, IN 46410-7064 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | _ |
| Horizon Fin 8585 Broadway # 88 | Line 4.9 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Merrillville, IN 46410-7064 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | _ |
| Horizon Fin 8585 Broadway # 88 | Line 4.10 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims |
| Merrillville, IN 46410-7064 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 did ye | ou list the original creditor? |

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| Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole | Dodament rag | Case number (f know) | | | |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Horizon Fin 8585 Broadway # 88 Merrillville, IN 46410-7064 | Line 4.11 of (Check one): Last 4 digits of account number | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Name and Address Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108-7813 | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number | | | | |
| Name and Address Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673 | On which entry in Part 1 or Part 2 die Line 4.16 of (Check one): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------------|-----|---------------------------------------------------------------------------------------------------------|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 32,173.51 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 32,173.51 |

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| | | 12(1) | | |
|---------------------|--------------------------|-------------------|-------------------------------|----------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Nick Baker | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Nicole Baker | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIVISION | <u> </u> |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 2.1 | Hope and Keith Baker 610 Cottage Row Sycamore, IL 60178-2109 | Nick is on the title of the house with his parents. The mortgage was paid off by his parents and now Nick and Nicole pay them \$787.00 per month. |

Case 16-80694 Doc 1 Filed 03/22/16 Entered 03/22/16 16:01:41 Desc Main Document Page 30 of 50 Fill in this information to identify your case: Debtor 1 **Nick Baker** Middle Name Last Name Debtor 2 **Nicole Baker** Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G. line Street Number City State ZIP Code 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G. line Number Street City State ZIP Code

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| Fill | in this information to identify | your case: | | | | | | | | | | |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------|----------------|--------------------------------|----------------|----------------|---------------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------|
| Del | btor 1 Nick B | aker | | | | | _ | | | | | |
| 1 | btor 2 Nicole puse, if filing) | Baker | | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court | | ORTHERN DISTRICTIVISION | Γ OF ILLII | NOIS, WESTE | RN | | | | | | |
| (If ki | se number nown) | | | | | | | | nended plement | t showin | g postpetitio wing date: | n chapter 13 |
| 0 | fficial Form 106l | | | | | | | MM / | DD/ YY | YY | | |
| S | chedule I: Your | Incom | е | | | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as plying correct information. use. If you are separated anch a separate sheet to this for the Describe Employ | If you are mad your spoots orm. On the | narried and not filing use is not filing with | jointly, a | nd your spou not include in | se is forma | livin ation | ng with you, i about your | include spouse | information in the information i | ation about e space is i | your needed, |
| 1. | Fill in your employment information. | | | Debtor 1 | l | | | Del | btor 2 c | or non-f | iling spous | e |
| | If you have more than one jo | | Employment status | | ■ Employed | | | | ■ Employed | | | |
| | attach a separate page with information about additiona | | pioyment status | ☐ Not employed | | | | ☐ Not employed | | | | |
| | employers. | Oce | cupation | Truck I | Oriver | Nurse | | | | | | |
| | Include part-time, seasonal self-employed work. | , or Em | ployer's name | Ozinga | Ready Mix | | | Kishwaukee Hospital | | | | |
| | Occupation may include stu homemaker, if it applies. | udent or Em | ployer's address | 300 | Old Lagranç a, IL 60448- | | | te 1 Kish Hospital Dr DeKalb, IL 60115-9602 | | | | |
| | | Ho | w long employed the | ere? | 1 years an | 1 8 b | mon | nths | <u>1</u> | ears a | and 7 mon | ths_ |
| Pa | rt 2: Give Details Abou | ut Monthly I | Income | | | | | | | | | |
| | mate monthly income as of ess you are separated. | the date yo | u file this form. If you | u have not | hing to report f | or any | y line | e, write \$0 in th | he spac | e. Includ | de your non-f | filing spouse |
| | ou or your non-filing spouse ha | | n one employer, combi | ne the info | ormation for all | emplo | oyers | for that perso | on on th | e lines b | elow. If you | need more |
| | | | | | | | | For Debtor | 1 | | ebtor 2 or ing spouse | |
| 2. | List monthly gross wages deductions). If not paid mor | | | | | 2. | \$ | 6,161 | .06 | \$ | 3,041.3 | 9_ |
| 3. | Estimate and list monthly | overtime p | ay. | | | 3. | +\$ | 0 | 0.00 | +\$ | 0.0 | <u>o</u> |

6,161.06

3,041.39

Calculate gross Income. Add line 2 + line 3.

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| Debt Debt | | Baker, Nick & Baker, Nicole | _ | Cas | se number (if known) | | | | |
|--------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|----------------------|-----------|----------------|-------------------|-----------------|
| | | | | F | or Debtor 1 | | Debtor 2 | | |
| | Copy | y line 4 here | 4. | \$ | 6,161.06 | \$ | | 041.39 | |
| 5. | Lict | | | | | _ | | | _ |
| 5. | | all payroll deductions: | 5 - | Φ. | 4 400 77 | Φ. | | 400.00 | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$ \$ | 1,400.77 | \$_ \$ | | 496.60 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ _ | | 96.56 21.87 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$_ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | \$ | 0.00 | * * | | 75.75 | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | <u> </u> | | 0.00 | _ |
| | 5g. | Union dues | 5g. | \$ | 200.37 | <u> </u> | | 48.88 | _ |
| | 5h. | Other deductions. Specify: Cafeteria KCH | 5h.+ | \$ | | + \$ | | 1.95 | _ |
| | | ymca | | \$ | 0.00 | \$_ | | 10.27 | _ |
| | | gift | | \$ | 0.00 | \$ | | 6.37 | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ | 1,601.14 | \$ | | 758.25 | _ |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 4,559.92 | \$ | | 283.14 | - |
| 8. | | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$_ | | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | 0.00 | - |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$_ | | 0.00 | _ |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | | 0.00 | - |
| | 8g. | Pension or retirement income | — 8g. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ _ | | 0.00 | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.00 | \$ | | 0.00 | 0 |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. \$ | | 4,559.92 + \$ | 2,2 | 283.14 | = \$ | 6,843.06 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | | , |
| 11. | Inclu other | e all other regular contributions to the expenses that you list in Schedule and econtributions from an unmarried partner, members of your household, your definition or relatives. ot include any amounts already included in lines 2-10 or amounts that are not available: | ependen | | · | | lule J. 11. | +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | L | \$ | 6,843.06 |
| 13. | Do y □ | ou expect an increase or decrease within the year after you file this form? | ? | | | | | Combir monthly | ned y income |
| | | Yes. Explain: Debtor 1 - works less hours in winter Debtor 2 - maternity leave in June | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

| Fill i | n this informa | ation to identify yo | ur case: | | | | | |
|--------------|------------------------------|----------------------------------------------------------|-------------------|---------------------------------------------------------------------------|------------------------------------------|----------------|--------------------------------------|-------------------------------------------|
| Debt | or 1 | Nick Baker | | | | Chec | ck if this is: | |
| | | | | | | | An amended filing | |
| Debt (Spo | or 2 use, if filing) | Nicole Baker | • | | | | A supplement show expenses as of the | ving postpetition chapter following date: |
| Unite | ed States Bank | cruptcy Court for the: | | HERN DISTRICT OF ILLIN ERN DIVISION | IOIS, | - | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| | | orm 106J | | | | | | |
| Sc | hedule | J: Your E | Expen | ises | | | | 12 |
| info | rmation. If n nown). Ansv | | eded, attao n. | If two married people are ch another sheet to this fo | | | | |
| 1. | Is this a joi | nt case? | | | | | | |
| | ☐ No. Go t | o line 2. | | | | | | |
| | Yes. Doe | es Debtor 2 live i | n a separa | te household? | | | | |
| | ■ 1 □ \ | | t file Offici | al Form 106J-2, Expenses | for Separate Househ | oldof Debto | r 2. | |
| 2. | Do vou hav | ve dependents? | □ No | | | | | |
| | - | Debtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | e the | | | | | | □No |
| | dependents | | | | Daughter | | 14 | Yes |
| | | | | | | | | □ No |
| | | | | | Son | | _ 9 | Yes |
| | | | | | _ | | | □ No |
| | | | | | Son | | _ 7 | Yes |
| | | | | | 0 | | 4 | □ No |
| 3. | expenses of | penses include of people other th ad your depender | an $_{\square}$ | No Yes | Son | | _ 1 | ■ Yes |
| exp | mate your e | a date after the b | ur bankrı | y Expenses iptcy filing date unless yo is filed. If this is a suppl | | | | |
| valu | | ssistance and ha | | overnment assistance if ed it on Schedule I: Your | | | Your exp | enses |
| 4. | | or home ownershind any rent for the | | ses for your residence. In lot. | nclude first mortgage | 4. \$ | 8 | 787.00 |
| | If not inclu | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | : | 260.00 |
| | | estate taxes erty, homeowner's, | or renter's | s insurance | | 4a. ¶ 4b. ¶ | · | 260.00 57.00 |
| | | e maintenance, re | | | | 4c. \$ | | 0.00 |
| | | owner's associati | | | | 4d 9 | , ——— | 0.00 |

0.00

5. Additional mortgage payments for your residence, such as home equity loans

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| ebtor 1 ebtor 2 | Baker, Nick & Baker, Nicole | Case num | nber (if known) | |
|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------|-----------------------------|
| . Utilitie | 25: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 190.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 75.00 |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 330.00 |
| | Other. Specify: | 6d. | \$ | 0.00 |
| | and housekeeping supplies | 7. | \$ | 800.00 |
| | care and children's education costs | 8. | | 2,000.00 |
| Cloth | ing, laundry, and dry cleaning | 9. | \$ | 25.00 |
| | nal care products and services | 10. | \$ | 0.00 |
| . Medic | al and dental expenses | 11. | \$ | 300.00 |
| | portation. Include gas, maintenance, bus or train fare. | | | |
| | t include car payments. | 12. | \$ | 500.00 |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| l. Chari | table contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insura | | | | <u> </u> |
| | t include insurance deducted from your pay or included in lines 4 or 20. | 45- | Φ. | |
| | Life insurance | 15a. | · | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 200.00 |
| | Other insurance. Specify: | 15d. | \$ | 0.00 |
| i. Taxes Specif | b. Do not include taxes deducted from your pay or included in lines 4 or 20. y: | 16. | \$ | 0.00 |
| 7. Instal | Iment or lease payments: | | | |
| | Car payments for Vehicle 1 | 17a. | * | 0.00 |
| | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | Other. Specify: | 17c. | | 0.00 |
| | Other. Specify: | 17d. | . \$ <u> </u> | 0.00 |
| | payments of alimony, maintenance, and support that you did not report as | 18. | \$ | 0.00 |
| aeaua Othor | cted from your pay on line 5, Schedule I, Your Income (Official Form 106l). payments you make to support others who do not live with you. | 10. | ψ | |
| Specif | | 19. | Ψ | 0.00 |
| | real property expenses not included in lines 4 or 5 of this form or on Schedu | | | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | · . | 0.00 |
| | Homeowner's association or condominium dues | 20e. | | 0.00 |
| | : Specify: dance | 21. | · | 350.00 |
| | xpenses | | +\$ | 75.00 |
| | | | Γ | 73.00 |
| | late your monthly expenses | | | |
| | add lines 4 through 21. | | \$ | 5,949.00 |
| 22b. C | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | | \$ | 5,949.00 |
| 3. Calcu | late your monthly net income. | | | |
| 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 6,843.06 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 5,949.00 |
| | | | | <u> </u> |
| 23c. | Subtract your monthly expenses from your monthly income. | 222 | \$ | 894.06 |
| | The result is your monthly net income. | 23c. | \$ | 094.00 |
| For exa | u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your eation to the terms of your mortgage? | | | se or decrease because of a |
| ■ No | | | | |
| ☐ Ye | S. Explain here: | | | |

| Debtor 1 | Nick Baker | | | | |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------|
| | First Name | Middle Name | Last Name | } | |
| Debtor 2 | Nicole Baker | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT C | F ILLINOIS, WESTERN DIVISION | <u> </u> | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| Declarat | tion About | r, both are equally responsi | Debtor's Schedu | tion. | 12/1 |
| Declarate f two married per four must file this betaining money | eople are filing togethe | r, both are equally responsi ile bankruptcy schedules or in connection with a bankru | | tion. | cealing property or |
| f two married per You must file thing the obtaining money ears, or both. 1 | eople are filing togethers form whenever your | r, both are equally responsi ile bankruptcy schedules or in connection with a bankru | ble for supplying correct informa | tion. | cealing property or |
| Declarated per few must file this obtaining money ears, or both. 1 | eople are filing together s form whenever your or property by fraud 8 U.S.C. §§ 152, 1341, | r, both are equally responsi ile bankruptcy schedules or in connection with a bankru 1519, and 3571. | ble for supplying correct informa | tion. alse statement, con 5 \$250,000, or impr | cealing property or |
| Declarated per few must file this obtaining money ears, or both. 1 | eople are filing together s form whenever your or property by fraud 8 U.S.C. §§ 152, 1341, | r, both are equally responsi ile bankruptcy schedules or in connection with a bankru 1519, and 3571. | ble for supplying correct informa amended schedules. Making a f ptcy case can result in fines up t | tion. alse statement, con 5 \$250,000, or impr | cealing property or |

Nicole Baker Signature of Debtor 2

Date March 7, 2016

Nick Baker Signature of Debtor 1

Date March 7, 2016

| ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there | Fil | l in this inform | ation to identify your | case: | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------|---------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------|
| Debtor 2 First Married Not married What is your current marital status? Married Not married Not married Dates Bobtor 1 lived Debtor 4 Prior Address: Dates Debtor 1 lived Debtor 5 lived there will be sources of flocome or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, lideho, Loudisinae, Nevada, New Mexico, Puerto Rico, Texas, Washington and Visconism.) Part 2 Explain the Sources of Your Income Pres. Hill in the details. Debtor 1 Sources of Income Check all that apply. Debtor 1 Sources of Income Check all that apply. Debtor 1 Sources of Income Check all that apply. Debtor 1 Sources of Income Check all that apply. Debtor 1 Sources of Income Check all that apply. Debtor 2 Sources of Income Check all that apply. Debtor 2 Sources of Income Check all that apply. Debtor 3 Sources of Income Check all that apply. Debtor 4 Sources of Income Check all that apply. Debtor 4 Sources of Income Check all that apply. Debtor 4 Sources of Income Check all that apply. Debtor 5 Sources of Income Check all that apply. Debtor 6 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. Debtor 9 Sources of Income Check all that apply. | De | btor 1 | | | | | |
| Spouse (Bring) Frist Name Mode Name Last Name | De | ohtor 2 | BS2003 B1 8925 8025 | Middle Name | Last Name | | |
| Case number (If known) Check if this is an amended filing | | | | Middle Name | Last Name | } | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/1: Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and ferritories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any Income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes, Fill in the details. Debtor 1 Sources of Income Check all that apply. Gross Income Check all that apply. Gross Income Check all that apply. Check all that apply. Sources of Income Check all that apply. Sources of Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) | Un | ited States Ban | kruptcy Court for the: | NORTHERN DISTRICT C | F ILLINOIS, WESTERN DIV | VISION | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/1: Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Partis: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married During the last 3 years, have you lived anywhere other than where you live now? Dettor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any Income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Gross Income (Check all that apply. Bonuses, lips Debtor 1 Wages, commissions, bonuses, lips Sources of Incomes, Surges, Surges, Sources, Sources, Surges, Sources, | Ca | ise number | | | | 1 | |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/1: Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there 3. Within the last 8 years, did you over live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Dobtor 1 Sources of Income employment or from operating a businesses during this year or the two previous calendar years? Fill in the total amount of income you received from all jlobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Dobtor 1 Sources of Income Check all that apply. Gross Income Check all that apply. Sources of Income Sources, tips | (if k | (nown) | | | | | |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/1: Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married | | | | | | | imended ming |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/1: Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married | O. | fficial For | m 107 | | | | |
| information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: | | | | Affairs for Individ | luals Filing for B | ankruptcy | 12/1 |
| Married Not married Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 1 Prior Address: Dates Debtor 1 lived where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived where you live now. Debtor 2 Prior Address: Dates Debtor 2 lived there No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 2 lived there No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income (before deductions and exclusions) For the calendar year before that: (Vanuary 1 to December 31, 2014) Wages, commissions, bonuses, tips Sources, tips Sources, Washington and Wisconsin.) | info | ormation. If mo | re space is needed, a | le. If two married people are attach a separate sheet to th | e filing together, both are exist form. On the top of any | qually responsible for supply additional pages, write your | ring correct name and case number |
| ■ Married Not married Not married Not married No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived betwee you live now. Debtor 1 Prior Address: Dates Debtor 1 lived betwee you live now. Debtor 1 Prior Address: Dates Debtor 1 lived betwee you live now. Debtor 1 Prior Address: Dates Debtor 2 lived there Obstacle Debtor 2 Prior Address: Dates Debtor 2 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there Obstacle Debtor 2 Prior Address: Dates Debtor 2 lived there Obstacle Debtor 2 Prior Address: Dates Debtor 2 lived there Obstacle Debtor 2 Prior Address: Dates Debtor 2 lived there Obstacle Debtor 2 Prior Address: Dates Debtor 2 lived there Obstacle Debtor Dates Debtor 2 lived there Obstacle Debtor Debtor Debtor Debtor 2 lived Debtor 2 lived Debtor Debt | Pa | rt 1: Give De | etails About Your Mai | rital Status and Where You | Lived Before | | |
| Not married | 1. | What is your | current marital status | 37 | | | |
| 2. During the last 3 years, have you lived anywhere other than where you live now? No | | ■ Married | | | | | |
| No Ves. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived before 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any Income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Debtor 2 Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips | | ☐ Not marri | ied | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there lived there Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there lived there Debtor 2 Prior Address: Dates Debtor 2 lived there lived there Debtor 2 Prior Address: Dates Debtor 2 lived there lived th | 2. | During the las | st 3 years, have you l | ived anywhere other than w | here you live now? | | |
| Dates Debtor 1 Ived there Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 2 Prior Address: Dates Debtor 2 Ived there Dates Debtor 1 Prior Address: Dates Debtor 2 Prior Address: Dates Better | | ■ No | | | | | |
| there there lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Pert 2 Explain the Sources of Your Income 4. Did you have any Income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | ☐ Yes. List | all of the places you live | ed in the last 3 years. Do not in | nclude where you live now. | | |
| No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 | | Debtor 1 Price | or Address: | | ived Debtor 2 Prior Ad | dress: | |
| Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips \$0.00 | 3. stat | Within the las | t 8 years, did you eve s include Arizona, Cali | er live with a spouse or lega fornia, Idaho, Louisiana, Neva | il equivalent in a communit ada, New Mexico, Puerto Ric | y property state or territory? co, Texas, Washington and Wis | (Community property sconsin.) |
| Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips \$0.00 | | ■ No | | | | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | 1 <u>2-1</u> | e sure you fill out Sche | dule H: Your Codebtors (Offic | cial Form 106H). | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | Pa | rt 2 Explain | the Sources of Your | Income | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Sources of Income Check all that apply. Gross Income (before deductions and exclusions) \$47,200.00 Wages, commissions, bonuses, tips \$0.00 | | | | | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. For the calendar year before that: (January 1 to December 31, 2014) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$47,200.00 Wages, commissions, bonuses, tips | 4. | Fill in the total | amount of income you | ı received from all jobs and al | businesses, including part- | ime activities. | ar years? |
| Test. Fill in the details. Debtor 1 Sources of Income Check all that apply. For the calendar year before that: (January 1 to December 31, 2014) Debtor 2 Sources of Income (before deductions and exclusions) Gross Income (before deductions and exclusions) Sources of Income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$47,200.00 Wages, commissions, bonuses, tips \$0.00 | | □ No | | | | | |
| Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Sources of Income (before deductions and exclusions) Gross Income (before deductions and exclusions) Wages, commissions, bonuses, tips \$47,200.00 Wages, commissions, bonuses, tips \$0.00 | | | n the details. | | | | |
| Sources of Income Check all that apply. Gross Income (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Sources of Income (before deductions and exclusions) Gross Income (before deductions and exclusions) Wages, commissions, bonuses, tips \$47,200.00 Wages, commissions, bonuses, tips \$0.00 | | | | Debtor 1 | en frantziarian de la comptent | TO MANY STATES AND THE STATES | |
| Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips \$47,200.00 Uwages, commissions, bonuses, tips \$0.00 | | | | | Gross Income | | Gross income |
| (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | (before deductions and | | (before deductions |
| | | | | | \$47,200.00 | | \$0.00 |
| | | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| Debtor 1 Debtor 2 Baker, Nick & Baker, Nicole Cas | | | | | ase number(if known) | | |
|---------------------------------------------------|-------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-------------------------------------------------------|
| | | | | Debtor 1 | | Debtor 2 | Mittigate Marchaelander |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | ndar year: o Decembei | 31, 2013) | ■ Wages, commissions, bonuses, tips | \$56,110.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | | | | Operating a business | | ☐ Operating a business | |
| 5. | Include in other put | ncome regard plic benefit pa | dless of wheth syments; pens | ions; rental income; interest; d | o previous calendar years? nples of other income are alim ividends; money collected from ogether, list it only once under I | lawsuits: royalties: and gamb | curity, unemployment, and ling and lottery winnings. |
| | List each | source and | the gross inco | me from each source separate | ely. Do not include income that | you listed in line 4. | |
| | ■ No | | | | | | |
| | ☐ Yes | . Fill in the d | letails. | | | | |
| | | | | Debtor 1 Sources of income Describe below | Gross income (before deductions and exclusions) | Debtor 2 Sources of Income Describe below. | Gross Income (before deductions and exclusions) |
| Pá | rt 3: Li | st Certain P | ayments You | Made Before You Filed for | Bankruptcy | | |
| 6. | □ No. | Neither E individual During the No. Yes | primarily for a e 90 days befor Go to line List below creditor. Do payments t | personal, family, or household ore you filed for bankruptcy, did 7. each creditor to whom you paid o not include payments for do o an attorney for this bankrupt | mer debts. Consumer debts purpose." you pay any creditor a total of a total of \$6,225* or more in comestic support obligations, su | \$6,225* or more? ne or more payments and the ch as child support and alimo | total amount you paid tha |
| | ■ Yes | . Debtor 1 During the | or Debtor 2 o | or both have primarily consu ore you filed for bankruptcy, did | mer debts. you pay any creditor a total of | \$600 or more? | |
| | | ■ No. | Go to line | 7. | | | |
| | | □ _{Yes} | List below | each creditor to whom you paid or domestic support obligation | d a total of \$600 or more and th s, such as child support and al | e total amount you paid that c imony. Also, do not include pa | reditor. Do not include syments to an attorney for |
| | Credito | r's Name an | d Address | Dates of payme | ent Total amount paid | Amount you Was this still owe | payment for |
| 7. | which yo | nclude your are an offic | relatives; any g er, director, pe | general partners; relatives of ar erson in control, or owner of 20 | a payment on a debt you ow ny general partners; partnership % or more of their voting secur e payments for domestic suppo | s of which you are a general pities; and any managing agen | partner; corporations of |
| | ■ No | | | | | | |
| | | | ments to an ins | sider | | | |
| | Insider' | s Name and | Address | Dates of payme | ent Total amount paid | Amount you Reason still owe | for this payment |
| 8. | Within 1 | year before | you filed for | bankruptcy, did you make a | any payments or transfer an | v property on account of a | debt that benefited an |

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| | Baker, Nick & Baker, Nicole | | Case | number (if known) | | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------------------|
| | insider? Include payments on debts guaranteed or co | signed by an insider. | | | | |
| | ■ No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for th | le naument |
| | | and or paymont | paid | still owe | Include credito | |
| ırt | t 4: Identify Legal Actions, Repossessi | ons, and Foreclosures | | | | |
| - 8 | Within 1 year before you filed for bankru List all such matters, including personal injur and contract disputes. | ptcy, were you a party in a y cases, small claims actions | iny lawsuit, court actions, divorces, collection su | n, or administrat its, paternity action | ive proceeding as, support or cus | ? stody modifications |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title | Noture of the same | 0 | | | |
| | Case number | Nature of the case | Court or agency | | Status of the | case |
| | Charles Anderson v. Hope Baker, | Unknown | DEKALB COUN | TY, | ☐ Pending | |
| | Keith Baker & Nick Baker 02LM 0000395 | | ILLINOIS | | ☐ On appeal | |
| | 02LM 0000395 | | | | ☐ Concluded | |
| | | | | | 99Unknown | - \$1.058.00 |
| 8 | | | | | | |
| | Within 1 year before you filed for bankru Check all that apply and fill in the details be | ptcy, was any of your prop low. | perty repossessed, for | eclosed, garnishe | ed, attached, se | ized, or levied? |
| | Within 1 year before you filed for bankrup Check all that apply and fill in the details be No Yes. Fill in the information below. | ptcy, was any of your prop low. | erty repossessed, for | eclosed, garnish | ed, attached, se | ized, or levied? |
| | Check all that apply and fill in the details be | ptcy, was any of your prop low. Describe the Property | | eclosed, garnisho Date | ed, attached, se | Value of th |
| | ■ No □ Yes. Fill in the information below. | low. | | | ed, attached, se | Value of th |
| | ■ No □ Yes. Fill in the information below. | Describe the Property Explain what happene | <i>l</i> ed | Date | | Value of th propert |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be | Describe the Property Explain what happene | <i>l</i> ed | Date | | Value of th propert |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be | Describe the Property Explain what happene | <i>l</i> ed | Date | | Value of th propert |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be | Describe the Property Explain what happene | / ed cluding a bank or finar | Date nclal institution, s | set off any amou | Value of th propert unts from your |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankrui | Describe the Property Explain what happene uptcy, did any creditor, incecause you owed a debt? Describe the action the | ed cluding a bank or finar ne creditor took | Date ncial institution, s Date a taken | set off any amou action was | Value of the property ants from your Amoun |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or | Describe the Property Explain what happene uptcy, did any creditor, incecause you owed a debt? Describe the action the | ed cluding a bank or finar ne creditor took | Date ncial institution, s Date a taken | set off any amou action was | Value of the property ants from your Amoun |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or | Describe the Property Explain what happene uptcy, did any creditor, incecause you owed a debt? Describe the action the | ed cluding a bank or finar ne creditor took | Date ncial institution, s Date a taken | set off any amou action was | Value of the property ants from your Amoun |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or | Describe the Property Explain what happene uptcy, did any creditor, incecause you owed a debt? Describe the action the | ed cluding a bank or finar ne creditor took | Date ncial institution, s Date a taken | set off any amou action was | Value of the property ants from your Amoun |
| | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or | Describe the Property Explain what happene uptcy, did any creditor, in- cause you owed a debt? Describe the action the ptcy, was any of your prop- another official? | ed cluding a bank or finar ne creditor took | Date ncial institution, s Date a taken | set off any amou action was | Value of th propert ants from your Amoun |
| art. | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankraccounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or No Yes List Certain Gifts and Contribution: Within 2 years before you filed for bankru | Describe the Property Explain what happend uptcy, did any creditor, included a debt? Describe the action the ptcy, was any of your property another official? | ed cluding a bank or final ne creditor took perty in the possession | Date ncial institution, s Date a taken n of an assignee f | set off any amou action was for the benefit o | Value of th propert ants from your Amoun |
| art | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankraccounts or refuse to make a payment below. No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or No Yes List Certain Gifts and Contribution: Within 2 years before you filed for bankru No Yes. Fill in the details for each gift. | Describe the Property Explain what happene uptcy, did any creditor, in- cause you owed a debt? Describe the action the ptcy, was any of your properanother official? | ed cluding a bank or final ne creditor took perty in the possession | Date ncial institution, s Date a taken n of an assignee f | set off any amou action was for the benefit o | Value of th propert ants from your Amour |
| art | No Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankraccounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankru court-appointed receiver, a custodian, or No Yes List Certain Gifts and Contribution: Within 2 years before you filed for bankru | Describe the Property Explain what happene uptcy, did any creditor, in- cause you owed a debt? Describe the action the ptcy, was any of your properanother official? | ed cluding a bank or finar ne creditor took perty in the possession | Date ncial institution, so Date a taken n of an assignee for more than \$600 | set off any amou action was for the benefit o per person? you gave | Value of the property ants from your Amoun |

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| | btor 1 btor 2 Baker, Nick & Baker, Nicole | Case | e number(if known) | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------|
| 14. | Within 2 years before you filed for band ■ No □ Yes. Fill in the details for each gift or | kruptcy, did you give any gifts or contributions wi | th a total value of more than \$ | 600 to any charity |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | t total Describe what you contributed | Dates you contributed | Value |
| Pa | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for banks or gambling? | ruptcy or since you filed for bankruptcy, did you k | ose anything because of theft, | fire, other disaster, |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List propriet insurance claims on line 33 of Schedule A/B: Propriet | Date of your loss erty. | Value of property lost |
| Pa | 17: List Certain Payments or Transfe | ers | | |
| 16. | consulted about seeking bankruptcy or | ruptcy, did you or anyone else acting on your beh or preparing a bankruptcy petition? preparers, or credit counseling agencies for services re | • • • • • • • • • • • • • • • • • • • • | y to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178 | 1200.00 | 12/17/15 2/22/16 | \$1,200.00 |
| | Consumer Debt Counselors, Inc | | | \$0.00 |
| | website | | | |
| 17. | Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer tha | cruptcy, did you or anyone else acting on your beh reditors or to make payments to your creditors? at you listed on line 16. | alf pay or transfer any propert | y to anyone who |
| | ■ No | | | |
| | ☐ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| 18. | transferred in the ordinary course of you include both outright transfers and transfer gifts and transfers that you have already lis | ers made as security (such as the granting of a security | | ₹V 5\ 7\(\) |
| | No Yes. Fill in the details. | | | |
| | Person Who Received Transfer Address | property transferred | Describe any property or payments received or debts | Date transfer was made |
| | Person's relationship to you | | paid in exchange | |
| 10 | Within 10 years before you filed for har | plenutou did topo for any | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

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| | btor 1 btor 2 Baker, Nick & Baker, Nicole | | Case nu | mber (if known) | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | beneficiary? (These are often called asset-protein No | ection devices.) | | | |
| | Yes. Fill in the details. | | | | |
| | Name of trust | Description and value | of the property tran | sferred | Date Transfer was made |
| Pa | rt 8: List of Certain Financial Accounts, Inst | truments, Safe Deposit Box | es, and Storage Units | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No | other financial accounts; c | ertificates of deposit | - W - W - W - W - W - W - W - W - W - W | Anna de la constanta de la con |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | pe of account or strument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for bank | kruptcy, any safe dep | osit box or other depos | itory for securities, |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access Address (Number, Street, | | the contents | Do you still have it? |
| 22 | Here were stored assessed in a store of the | and ZIP Code) | | 9222 (1278) W. 1989 | |
| 22. | Have you stored property in a storage unit or | r place other than your nom | e within 1 year befor | e you filed for bankrupt | су |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had a to it? Address (Number, Street, and ZIP Code) | | the contents | Do you still have it? |
| Pai | t 9: Identify Property You Hold or Control f | or Someone Else | | | |
| 23. | 2012 P. 10 10 10 10 10 10 10 10 10 10 10 10 10 | | ny property you borr | owed from, are storing | for, or hold in trust for |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property (Number, Street, City, State a Code) | | the property | Value |
| Par | t 10: Give Details About Environmental Infor | rmation | | | |
| | the purpose of Part 10, the following definition | | | | |
| | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances, | air, land, soil, surface wate | n concerning pollution r, groundwater, or of | n, contamination, relea ther medium, including | ses of hazardous or statutes or regulations |
| | Site means any location, facility, or property a own, operate, or utilize it, including disposal | as defined under any enviro | nmental law, whethe | r you now own, operate | , or utilize it or used to |
| | Hazardous material means anything an enviro | | azardone masta ba- | ardous oubstance tout | Caubatanaa baasaa |
| _ | riazaruous materiai means any tiling an envir | uninentai law dennes as a n | azardous waste, naz | ardous substance, toxic | : Siinstance, nazardoile |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

material, pollutant, contaminant, or similar term.

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| | btor 1 btor 2 Baker, Nick & Baker, Nicole | | Case number (if known) | |
|-----|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------|
| 24. | Has any governmental unit notified you that y | you may be liable or potentially liable un | der or in violation of an environme | ntal law? |
| | ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of a | ny release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or admi | nistrative proceeding under any environ | mental law? Include settlements an | d orders. |
| | ■ No □ Yes. Fill in the details. | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | lature of the case | Status of the case |
| Par | rt 11: Give Details About Your Business or Co | onnections to Any Business | | |
| 27. | Within 4 years before you filed for bankruptcy | y, did you own a business or have any o | f the following connections to any t | ousiness? |
| | ■ A sole proprietor or self-employed in | | 450 T | |
| | ☐ A member of a limited liability compa | | | |
| | ☐ A partner in a partnership | | San France | |
| | ☐ An officer, director, or managing exec | cutive of a corporation | | |
| | ☐ An owner of at least 5% of the voting | | | |
| | No. None of the above applies. Go to Pa | | | |
| | 22-29 CAMP 500 10 10 10 10 | | | |
| | Yes. Check all that apply above and fill in Business Name Address (Number, Street, City, State and ZIP Code) | n the details below for each business. Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security of Dates business existed | |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | y, did you give a financial statement to a | nyone about your business? Includ | e all financial |
| | ■ No | | | |
| | ☐ Yes. Fill in the details below. | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| Par | rt 12: Sign Below | | | |

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

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| Debtor 1 Debtor 2 Baker, Nick & Baker, Nicol | le | Case number (if known) |
|--------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| bankruptcy case can result in fines up to \$ 18 U.S.C. §§ 152, 1341, 1519, and 3571. | 3250,000, or Imprisonment for up to 20 year | rs, or both. |
| Nick Baker Signature of Debtor 1 | Nicole Baker Signature of Debtor 2 | |
| Date March 7, 2016 | DateMarch 7, 2016 | Lagrange and the second |
| Did you attach additional pages to <i>Your St</i> ■ No □ Yes | atement of Financial Affairs for Individuals | s Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone who ■ No | is not an attorney to help you fill out bank | cruptcy forms? |
| ☐ Yes. Name of Person . Attach the E | Bankruptcy Petition Preparer's Notice, Declara | tion, and Signature (Official Form 119) |

| Debtor 1 Nick Baker Midde Name Last Name Last Name Last Name Nicole Baker Nicole Baker Midde Name Last Name | Fill in this inform | nation to identify your case: | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Debtor 2 Spaces, Kings) Middle Name Last Name Nicole Baker Nicole Baker Middle Name Last Name Nicole States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION Case number Withousers Check if this is an amended filing Check if this is an amended filing under chapter 7, you must fill out this form if: Creditors have claims secured by your property, or you have lased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, withinterer is earlier, unloss the ease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, withinterer is earlier, unloss the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. You married people are filling together in a joint case, both are equally responsible for s | Debtor 1 | Nick Baker | | |
| Sozues & Rings First Name Mode Name Last Name | | First Name Middle Nam | ne Last Name | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION Case number Case number | | | l act Nama | |
| Case number (# Norm) Check if this is an amended filing | | | 50000000000000000000000000000000000000 | |
| Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must fills this form with the court within 30 days after you file your bankruptcy potition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and leasors you list on the form If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Continued the form of the form. On the top of any additional pages, write your name and case number (if known). For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 105D), fill in the Information below. Identity the creditor and the property that is collateral | United States Bar | nkruptcy Court for the: NORTHERN I | DISTRICT OF ILLINOIS, WESTERN DIVISION | |
| Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: | | | | |
| Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leaded personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form If two married people are filling together in a Joint case, both are equally responsible for supplying correct information. Both debtors must slign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). continued to the form of the property that is collateral | (if known) | | | |
| Statement of Intention for Individuals Filing Under Chapter 7 It you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form If two married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Fail 12 | | | | amended filing |
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| you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 12: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 105D), fill in the information below. Identify the creditor and the property that is collateral what do you intend to do with the property that secures a debt? Creditor's Ntibk Sycmre Surrender the property and redeem it. Retain the property and redeem it. Retain the property and lexplain]: Creditor's Ntibk Sycmre Surrender the property and lexplain]: Creditor's Ntibk Sycmre Surrender the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. | | | t fill out this form if: | |
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| If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). For II: List Your Creditors Who Have Secured Claims | whiches | rorm with the court within 30 days and ver is earlier, unless the court extends | er you file your bankruptcy petition or by the date set the time for cause. You must also send copies to the o | for the meeting of creditors, |
| Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Port 1: List Your Creditors Who Have Secured Claims | the forn | 1 | § 338.13 [-1.01.13.13.13.13.13.14.14.14.14.14.14.14.14.14.14.14.14.14. | |
| Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Port 1: List Your Creditors Who Have Secured Claims | If two married per | ople are filing together in a joint case, | both are equally responsible for supplying correct info | ermation. Both debtors must sign |
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| Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? Did you claim the property as exempt on Schedule C? | | | | |
| Identify the creditor and the property that is collateral secures a debt? | 1. For any credito | rs that you listed in Part 1 of Schedule | D: Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
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| Description of 2002 Dodge Ram Pickup 1500 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | | прк Sycmre | | □ No |
| Description of 2002 Dodge Ram Pickup 1500 Agreement. | name. | | | ■ Voc |
| | Description of | 2002 Dodge Ram Pickup 1500 | | - 165 |
| | property | | | |

Official Form 108

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| Debtor 1 Debtor 2 Baker, Ni | ick & Baker, Nicole | Case number (if known) | |
|------------------------------------|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| securing debt: | | ^ | _ |
| | Sycmre | ☐ Surrender the property. | □ No |
| name: | | Retain the property and redeem it. | ■ Yes |
| Description of 20 | 06 Ford 250 Super Duty XL | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | | ☐ Retain the property and [explain]: | _ |
| | nexpired Personal Property Leases | | |
| the information below | . Do not list real estate leases. Unex | I in Schedule G: Executory Contracts and Unexpired pired leases are leases that are still in effect; the leas trustee does not assume it. 11 U.S.C. § 365(p)(2). | Leases (Official Form 106G), fill in se period has not yet ended. You |
| Describe your unexp | red personal property leases | | Will the lease be assumed? |
| Lessor's name: | Hope and Keith Baker | | ■ No |
| | | | ☐ Yes |
| Description of leased Property: | Nick is on the title of the hou off by his parents and now N | se with his parents. The mortgage was paid lick and Nicole pay them \$787.00 per month. | |
| Part 3: Sign Below | | | |
| Under penalty of perju | ry, I declare that I have indicated m | ny intention about any property of my estate that secu | ures a debt and any personal |
| X | tt to an unexpired lease. | × Mn- | |
| Nick Baker | | Nicole Baker | |
| Signature of Debt | or 1 | Signature of Debtor 2 | |
| Date March | 7, 2016 | Date _March 7, 2016 | |

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United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | | Case No |
|--------------------------------|----------------------------------------|--------------------------------------------------------|
| Baker, Nick & Baker, Nicole | | Chapter 7 |
| | Debtor(s) | 1 |
| | VERIFICATION OF CREI | DITOR MATRIX |
| | | Number of Creditors20 |
| The above-named Debtor(s) here | by verifies that the list of creditors | is true and correct to the best of my (our) knowledge. |
| Date: March 7, 2016 | Debtor | |
| | M | |
| | Joint Debtor | |

Aishling Obstetrics and Gyn. 831 Sandhurst Dr Sandwich, IL 60548-1390

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Bby/cbna PO Box 6497 Sioux Falls, SD 57117-6497

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Comenity Bank/Gndrmtmc PO Box 182125 Columbus, OH 43218-2125 Comenity Bank/Gndrmtmc PO Box 182789 Columbus, OH 43218-2789

Creditors Protection S 308 W State St Ste 485 Rockford, IL 61101-1196

Dependon Collectoin Services PO Box 4833 Oak Brook, IL 60522-4833

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Hope and Keith Baker 610 Cottage Row Sycamore, IL 60178-2109

Horizon Fin 8585 Broadway # 88 Merrillville, IN 46410-7064 MED1 02 Kishwaukee Hospital 1 Kish Hospital Dr DeKalb, IL 60115-9602

MED1 02 Valley West Hospital 11 E Pleasant Ave Sandwich, IL 60548-1100

Ntlbk Sycmre 230 W State St Sycamore, IL 60178-1419

ORAL MAXILLOFACIAL SURGEONS 1675 Bethany Rd # A Sycamore, IL 60178-3160

Rockford Health Physicians 2300 N Rockton Ave Rockford, IL 61103-3619

Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108-7813

Syncb/Blains Farm&Flee 950 Forrer Blvd Kettering, OH 45420-1469 Target C/O Financial & Retail Services Mailstop PO Box 9475 Minneapolis, MN 55440-9475

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673 Doc 1

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | Case No. |
|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Baker, Nick & Baker, Nicole | Chapter 7 |
| Debtor(s) CERTIFICATION OF NOTICE TO CON UNDER § 342(b) OF THE BANKR | |
| Certificate of [Non-Attorney] Bankrupt | cy Petition Preparer |
| I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, notice, as required by § 342(b) of the Bankruptcy Code. | hereby certify that I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |
| X | (Required by 11 U.S.C. § 110.) |
| Certificate of the Debt | or |
| I (We), the debtor(s), affirm that I (we) have received and read the attached not | ice, as required by § 342(b) of the Bankruptcy Code. |
| Baker, Nick & Baker, Nicole Printed Name(s) of Debtor(s) X Signature | re of Debtor Date |
| Case No. (if known) Signatu | re of Joint Debtor (if any) Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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